

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

09/884009

## CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| TOTAL CLAIMS                     |  |              |                          |
|----------------------------------|--|--------------|--------------------------|
| FOR                              |  | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          |  | minus 20 =   |                          |
| INDEPENDENT CLAIMS               |  | minus 3 =    |                          |
| MULTIPLE DEPENDENT CLAIM PRESENT |  |              | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
|--|----------------------------------|-------|------------------------------------|--------------------------|
|  | Total                            | Minus |                                    |                          |
|  | 1-17-06                          | 20    | 24                                 | =                        |
|  | Independent                      | 4     | 4                                  | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |                                    | <input type="checkbox"/> |

SMALL ENTITY TYPE  OTHER THAN OR. SMALL ENTITY

| RATE      | FEES   | RATE         | FEES   |
|-----------|--------|--------------|--------|
| BASIC FEE | 150.00 | OR BASIC FEE | 300.00 |
| X\$ 25=   |        | OR X\$50=    |        |
| X100=     |        | OR X200=     |        |
| +180=     |        | OR +360=     |        |
| TOTAL     |        | OR TOTAL     |        |

SMALL ENTITY OTHER THAN OR SMALL ENTITY

| RATE             | ADDITIONAL FEE | RATE                | ADDITIONAL FEE |
|------------------|----------------|---------------------|----------------|
| X\$ 25=          |                | OR X\$50=           |                |
| X100=            |                | OR X200=            |                |
| +180=            |                | OR +360=            |                |
| TOTAL ADDIT. FEE |                | OR TOTAL ADDIT. FEE |                |

| AMENDMENT B                                    | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
|--|----------------------------------|-------|------------------------------------|--------------------------|
|  | Total                            | Minus |                                    |                          |
|  |                                  |       |                                    |                          |
|  | Independent                      | Minus | ***                                | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |                                    | <input type="checkbox"/> |

| RATE             | ADDITIONAL FEE | RATE                | ADDITIONAL FEE |
|------------------|----------------|---------------------|----------------|
| X\$ 25=          |                | OR X\$50=           |                |
| X100=            |                | OR X200=            |                |
| +180=            |                | OR +360=            |                |
| TOTAL ADDIT. FEE |                | OR TOTAL ADDIT. FEE |                |

| AMENDMENT C                                    | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
|--|----------------------------------|-------|------------------------------------|--------------------------|
|  | Total                            | Minus |                                    |                          |
|  |                                  |       |                                    |                          |
|  | Independent                      | Minus | ***                                | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |                                    | <input type="checkbox"/> |

| RATE    | ADDITIONAL FEE | RATE      | ADDITIONAL FEE |
|---------|----------------|-----------|----------------|
| X\$ 25= |                | OR X\$50= |                |
| X100=   |                | OR X200=  |                |
| +180=   |                | OR +360=  |                |